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ASTHO



ASTHO

- Membership comprises the executive officer of the department of health of every state, territory, or possession of the United States.
- ASTHO's influence and activities reflect the major positions, issues and concerns of state health departments.
- Activities and Programs
 - Public Health Preparedness Policy
 - Infectious Disease Policy
 - Access Policy
 - Informatics Policy
 - Workforce Development Policy
 - Prevention Policy
 - More…



Preparedness at ASTHO

- Support Public Health Preparedness Policy Committee and Preparedness Coordinators Group.
- Provide feedback on state needs related to preparedness grant programs.
- Workgroups on
 - Rural preparedness
 - Mass Prophylaxis
 - SNS ("how to get to green?")
- Publish reports and articles that highlight important issues and best practices in public health preparedness policy.



Impact of the 2004 Hurricanes in Florida

- 5 named storms over 51 days beginning 8-12-04
 - Tropical Storm Bonnie 8-12
 - Hurricane Charley 8-13
 - Hurricane Frances 9-5
 - Hurricane Ivan 9-16
 - Hurricane Jeanne 9-25
- Impact
 - 117 fatalities
 - Power outages to 8.5 million customers
 - Major and critical facilities that were damaged or destroyed:
 - 57 schools, 16 fire stations, 13 hospitals, 5 law enforcement facilities, 3 shelter facilities other than schools, 3 nursing homes, 2 mental treatment facilities, 2 county emergency operations centers, 1 town hall



Florida Hurricane Response Activities

- Evacuated 7-8 million people.
- Sheltered 368,438 people in general and special needs shelters.
- Instituted boil water notices in 34 counties.
- Removed 37,670,622 cubic yards of debris.
- Ordered closures at all schools.
- Performed emergency public health functions in all areas of the state.



Public Health Mutual Aid

- Facilitated by the Emergency Management Assistance Compact (EMAC).
- Half of US states sent public health mutual aid personnel to Florida (including Alaska)
- Each hurricane brought up to 600 public health volunteers from other states.
- Types of volunteers sent to Florida:
 - Nurses (more than 80% of the total volunteer pool)
 - Physicians
 - Epidemiologists
 - Environmental health professionals
 - Veterinary professionals
 - Others



Preliminary Lessons Learned

- EMAC can be an essential tool for public health mutual aid.
- It is often best to make an informal contact in the state you are requesting resources from at the same time as the formal EMAC request.
- Experience and training can help public health agencies make better use of EMAC.
- Issues for further study include:
 - Licensing and credentialing of out of state health professionals
 - Transportation of volunteers
 - Public health resource typing
 - Coordination of mutual aid with federal resources



ASTHO's Role

- Conducted two informal telephone interviews with representatives of the Florida Department of Health to determine scope of the mutual aid response.
- Hosted a conference call on EMAC with officials from Florida public health and emergency management agencies, the US Department of Health and Human Services, the National Emergency Management Association, and the EMAC staff.
- Published an article on the EMAC response for the Spring 2005 ASTHO Report.
- Scheduled conference calls for April 18 and 19 to discuss mutual aid with State Public Health Preparedness Directors.

